

QUALLION LEGAL

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Attention:	Attn: Group Art Unit 4191	From:	Travis Dodd
fax:	571-273-8300	Fax:	818-833-2065
Phone:		Phone:	818-833-2014
Company:	U.S. Patent and Trademark Office	Company:	Quallion LLC
		Pages:	Total of (20) Pages
Re:	Application Serial No.: 10/810,081 Title: ELECROLYTE INCLUDING POLYSILOXANE WITH CYCLIC CARBONATE GROUPS Filed: March 25, 2004 Examiner: BEST, Zachary Group Art Unit: 4191 Attorney Docket No.: Q199-US1	Date:	April 2, 2008

If you have any questions or did not receive this transmission in its entirety, please call (818) 833-2000, extension 2014.

#### **CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)**

I hereby certify that the following documents are being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 703-273-8300 on April 2, 2008:

Amendment Transmittal Letter (2 pages) Fee Transmittal (in duplicate) (2 pages) Amendment (15 pages)

Lisa K. Robbins

(Name of Person Signing Certificate)

(Signature)

#### Quallion LLC

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

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#### APR 02 2008

#### Application Number 10/810,081 March 26, 2004 **TRANSMITTAL** Filing Date Robert West et al. First Named Inventor **FORM** 4191 Group Art Unit (to be used for all correspondence after initial filing) BEST, Zachary Examiner Name Attorney Docket Number Q199-US1 Total Number of Pages In This Submission

EN	ENCLOSURES (check all that apply)			
x Fee Transmittal Form	Assignment Papers (for an Application)	After Allowance Communication to Group		
x Fee Authorized	Drawing(s)	Appeal Communication to Board of Appeals and Interferences		
X Amendment	Licensing-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
X Amendment	Petition to Covert to a Provisional Application	Proprietary Information		
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter		
Extension of Time Request	Terminal Disclaimer	Other Enclosure(s) (please identify below):		
Express Abandonment Request	Request for Refund			
Information Disclosure Statement	CD, Number of CD(s)			
Middle State Control	Remarks			
Certified Copy of Priority Document(s)				
Response to Missing Parts/ Incomplete Application				
Response to Missing Parts under 37 CFR 1.52 or 1.53		·		
Customer Number or Bar Code Label	31815 (Insert Customer No. or Attach bar code label here)			
The Commissioner is hereby authorized to charge No. 50-0921. A duplicate copy of this sheet is enclosed.		y overpayment to Deposit Account		
	Respectfully submitted,	MI		
Dated: 04/01/2008	Ву:			
Phone: (816) 833-2003 Fax: (818) 833-2065	Travis Dodd Attomeys for Applicant P.O. Box 923127			
	Sylmar, CA 91 <u>392-3127</u>			

	CERTIFIC	CATE OF MAILING		
mall	his correspondence is being deposited wi essed to: Commissioner of Patents and T			
Typed or printed name	TRAVIS DODD			
Signature		·	Date	

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#### APR 02 2008

# TRANSMITTAL FORM (to be used for all correspondence after initial filing) Total Number of Pages in This Submission Application Number 10/810,081 Filing Date March 26, 2004 First Named Inventor Robert West et al. Group Art Unit 4191 ExamIner Name BEST, Zachary Attorney Docket Number Q199-US1

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Dated: 04/01/2008	By:			
Phone: (818) 833-2003 Fax: (818) 833-2065	Phone: (818) 833-2003 Travls Dodd Fax: (818) 833-2065 Attorneys for Applicant(s) P.O. Box 923127			
	Sylmar, CA 91392-312			

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mal)	his correspondence is being deposited values of Palents and					
Typed or printed name	TRAVIS DODD					
Signature			Date			

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### APR 02 2008

#### FEE TRANSMITTAL

Attorney Docket No.	Q199-US1	
First Named Inventor:	WEST, Robert et al.	
Application Number	10/810,081	
Filing Date:	March 25, 2004	
Examiner Name:	4191	
Group/Art Unit:	Best, Zachary	

TOTAL AMOUNT OF PAYMENT:	\$ .00
METHOD OF PAYMENT (check One)	1. X The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:
	Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC
	X. Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17
	2. Payment Enclosed: Check Moncy Order Other - Credit Card

2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	xx	xx	\$310.00	\$155.00	\$.00
Total Claims	60 - 65=	0	X \$50.00	X \$25.00	\$.00
Independent Claims	4 - 8 =	0	X \$210.00	X \$105.00	\$.00
Multiple Dependent Cla	im(s) (if applicable	)	\$370.00	\$185.00	\$.00
Total of above Calculations =					\$.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 210.00	\$ 105.00	\$.00
Reissue filing fcc	\$ 310.00	\$ 155.00	\$.00
Provisional filing fee	\$ 210.00	\$ 105.00	\$.00
	Total of ab	ove Calculations =	\$.00

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	S
	\$	\$	\$
	\$	\$	\$
	S	\$	\$
		TOTAL:	S

Name (print/type)	TRAVIS L. DODD	Registration N (Attorney/Age		42,491
Signature		Date	04/01/	2008

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#### FEE TRANSMITTAL

QUALLION LEGAL

APR 02 2008

Attorney Docket No.	Q199-US1	
First Named Inventor:	WEST, Robert et al.	
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Fee Description	Large Entity	Small Entity	Entity Other	
	<u> </u>	S	S	
·	\$	\$	S	
	\$	\$	S	
	S	\$	S	
		TOTAL:	\$	

Name (print/type)	TRAVIS L. DODD	Registration N (Attorney/Age		42,491
Signature		Date	04/01/	2008

PATENT DOCKET NO. Q199-US1

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

WEST, Robert C. et al.

Examiner:

Best, Zachary

Serial No.:

10/810,081

Art Unit:

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APR 02 2008

Filed: March 25, 2004

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POLYSILOXANE WITH CYCLIC

CARBONATE GROUPS

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

#### AMENDMENT AND REQUEST FOR RECONSIDERATION

This communication is in response to the Office Action mailed March 5, 2008.